

Accept Care Ltd

Accept Care Limited

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Outstanding ☆

Summary of findings

Overall summary

About the service

Accept Care provides personal care on a supported living basis to people living in their own houses and flats in the community on three sites in County Durham. It provides a service to adults with learning disabilities and mental health issues. At the time of our inspection there were 56 people using the service.

People's experience of the service and what we found:

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

Right Support

Staff supported people to have the maximum possible choice, control and independence and they supported people to make decisions following best practice in decision-making. Staff communicated well with people and ensured others were supported to do so through good information sharing. People were enabled to make a range of choices and to pursue a range of new activities and experiences, where they wanted.

Right Care

Staff protected people from poor care and abuse. Staff had a range of training to equip them to support people and regularly had access to additional training. Staff were deployed to keep people safe and enable them to fulfil their goals. Risks to people were assessed and people were enabled people to take positive risks in order to fulfil their goals. Leaders worked well with a range of agencies to ensure risk management plans were not overly restrictive.

Right Culture

The culture was geared towards supporting and empowering each person who used the service in a way that worked for them. People were supported to explore the things that mattered to them and to live the lives they wanted. Staff supported this and this inclusive ethos of the service was evident throughout. Leaders were passionate about advocating for people's rights and celebrating their achievements. Staff worked together to ensure people enjoyed improved quality of life outcomes. The culture was open and positive. Leaders had made a range of local and wider links that helped continually improve the service, sharing best practice. They had a positive impact on the broader landscape of social care and were a source of information and advice for others in the sector.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

The last rating for this service was Good (report published 4 April 2018).

Why we inspected

This inspection was prompted by a review of the information we held about this service and the time since the last inspection.

We undertook a focused inspection to review the key questions of safe and well-led only. For those key question not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

You can read the report from our last comprehensive inspection by selecting the 'all reports' link for Accept Care on our website at www.cqc.org.uk.

Follow Up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

The five questions we ask about services and what we found

We always ask the following five questions of services.

<p>Is the service safe?</p> <p>The service was safe.</p> <p>Details are in our safe findings below.</p>	<p>Good ●</p>
<p>Is the service well-led?</p> <p>The service was exceptionally well-led.</p> <p>Details are in our well-led findings below.</p>	<p>Outstanding ☆</p>

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Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

Inspection team

The inspection team consisted of 1 inspector and 1 Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Accept Care is a Supported Living service. Staff provide on-site support at three sites in County Durham where people live in their own flats. At the time of our inspection there were 56 people using the service.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

The inspection was announced. We gave the service 24 hours' notice of the inspection. This was because we needed to be sure that the provider or registered manager would be in the office to support the inspection.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and a range of professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send

us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 6 people who used the service and 8 relatives. We spoke with the registered manager, the head of operations, and 9 support workers.

We looked at a variety of records. These included people's care and medicine records, monitoring documentation, staff files, engagement work, training records, newsletters and audits used to monitor the service.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question Good. At this inspection the rating has remained Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse and avoidable harm

- People were protected from abuse and avoidable harm. Staff were well trained to identify potential risks and act on them effectively. Safeguarding refresher training was in place and the service worked closely with the local safeguarding team and other professionals. The service recently engaged in safeguarding week events to increase awareness.
- People felt safe. All people we spoke with confirmed this and one relative said, "If anything happens they ring me straight away, communication is really good, and we know [person] is safe."

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- The provider reflected on any incidents or accidents to ensure lessons could be learned and future risks reduced.
- Staff promoted positive risk taking and supported people to live a life free from restrictions. Staff followed guidance and took action to mitigate any identified risks. Debriefs were part of the culture following any incidents.
- People were involved in creating their risk plans and how to gradually reduce their reliance on others and increase their independence and autonomy. The service used Positive Behaviour Support (PBS) appropriately and engaged in external training to ensure staff had an up-to-date understanding. PBS is a person-centred means of supporting people so they can have a better quality of life. The service also used their own inhouse trainer to enable staff to be confident in de-escalation techniques. This training is coproduced with the Restraint Reduction Network and British Institute of Learning Disabilities. This meant staff were confident in supporting people safely when they may be experiencing heightened anxieties.
- The provider worked openly with external professionals to improve people's safety, and their knowledge of potential risks. For instance, the provider worked closely with local police to increase people's knowledge of the risks of hate crime and mate crime. External professionals told us the service had a "proactive approach" to risk management.

Staffing and recruitment

- There were sufficient staff on duty to keep people safe and to ensure people received the support they required. The provider worked with commissioners to review people's care needs and ensure they had the right level of support.
- The provider had taken a range of steps to reduce the use of agency staff. Most people we spoke with agreed they had support from a consistent team of staff who knew them well. One said, "There was a bit of staff up and downs, but we feel reassured – they have a good balance."
- Recruitment processes were safe. The provider understood the need for Disclosure and Barring Service (DBS) and a range of other checks. DBS provide information including details about convictions and

cautions held on the Police National Computer. This helps providers make safer recruitment decisions.

Using medicines safely

- Medicines were administered safely, and the provider followed good practice. For instance, medicines that were prescribed 'when required' were supported by clear protocols, which were person centred and up to date.
- The provider ensured people's medicines were reviewed regularly to ensure people were not receiving unnecessary medication. They understood and acted in line with Stopping Over Medication of people with a learning disability, autism or both with Psychotropic medicines (STOMP).
- Staff had received medicines training and had their competency assessed regularly.

Preventing and controlling infection

- People were supported to take pride in their own personal spaces and to keep communal areas clear. One relative said, "It's clean and friendly, it's like a home from home."
- The provider was extremely proud of how they had kept people and staff safe during the pandemic.

Is the service well-led?

Our findings

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At our last inspection we rated this key question Good. The rating has improved to Outstanding. This meant service leadership was exceptional and distinctive. Leaders and the service culture they created drove and improved high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The culture was centred around people being empowered and enabled to achieve significantly improved health and wellbeing outcomes. Their independence and contributions were respected and celebrated by an inclusive, passionate staff team. A number of people had developed independence, with the help of staff, such that the hours of support they needed from staff was reduced, and they were able to do much more on their own. One relative said, "I can't think of anything to improve it". One external professional said, "The staff team as a whole provide exceptional person-centred care."
- The provider had effective systems and processes in place to help drive a person-centred culture. Records demonstrated how people had been supported to meet their goals and the provider had introduced a new approach to reviews where the person was more in control of who attends their review and what they want to focus on.
- People engaged openly and positively with staff and the registered manager throughout the inspection. One relative said, "Accept Care really encourage choice and they're very innovative". Another external professional said, "The Head of Operations is a true advocate for the vulnerable service users Accept Care provide care and support to. They hold the best interests of each and every service user at heart."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The provider had a management structure in place to support their ethos of person-centred care, with on-site support for people from staff with extensive knowledge. They encouraged and supported staff to develop, for instance through champion roles, and through securing additional specialist training. This included additional PBS training and bereavement training, which meant staff were extremely well equipped to support people. For instance, supporting one person with a range of complex behaviours to live independently when others felt this presented too much risk. Staff worked exceptionally hard to support the person, to enable them to find positive outlets, to share learning with clinicians and others involved, and to ensure they continued living the life they wanted.
- Leaders and staff demonstrated confidence and knowledge in a range of areas of best practice and with regard to some complex issues people needed support with. One healthcare professional said, "We come to them when we have complex cases and we need that experience/knowledge. They are a great help."
- Audits were completed on a regular basis and an effective source of identifying improvements.

Continuous learning and improving care; Working in partnership with others

- The provider worked proactively and innovatively with a range of external partners to improve people's safety and improve their health and wellbeing outcomes. This included mutually supportive links with police, local learning disability team, charities, recruitment organisations, local businesses, housing providers and the Restraint Reduction Network (RRN). These had demonstrable significant impacts on people's lives, for instance finding employment, feeling safer, avoiding serious health complications, reduced hospital readmissions and improving their health and fitness. The provider's work with RRN saw a significant decline in the use of any form of restraint over the past five years, and positive redirection was part of day to day care.

- The registered manager and team regularly reflected on current best practice and how they could continually improve. This included bringing back learning from national events and engaging in the local provider forum meetings. One staff member said, "The training has been great so far – really interactive and not like a lot of the online training you get. Very impressed." Another said, "The managers are really clear about how the service is run and how things are geared towards people's needs." The learning culture helped improve outcomes for people who used the service.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- Staff respected people's protected characteristics and worked hard to ensure they suffered no detriments and were able to live full lives. One external professional said, "The leadership is proactive and person-centred. It's not one size fits all, they consider everyone's individualities, and they are very open and supportive." The provider had reviewed its approach to hospital passports to turn them into 'healthcare passports', to be used at all health appointments. These contained detailed person-centred information that meant healthcare professionals were better equipped to support people in their preferred way and to gain a good understanding of their needs.

- Staff were involved in the running of the service and acted in line with the provider's values. The recruitment process supported this, with applicants meeting people to see if they behaved in a values-based way, in line with the provider's expectations of prospective staff.

- The provider ran a day centre for people who used the service and other people who wanted to access it. This was popular with people who used the service and the provider was working to make broader links with the community.

- Staff were respected and valued for the contribution they made. The provider was a member of Mindful Employer and had a number of staff trained as mental health first aiders.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The provider understood their responsibilities under the duty of candour. They communicated openly and promptly with people and their families when things went wrong.